

Case: 3:11-cv-00183-wmc Document #: 11 (Ex Parte) Filed: 05/27/11 Page 1 of 1

pro-se motion/Request for Appointment of Counsel. Defendant in County Jail in Illinois.

FINANCIAL AFFIDAVIT IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN THE CASE OF United States v. Real property ¹²⁸⁵ ~~Real~~ ^{Real}

FOR AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Troy Charles Thompson

CHARGE/OFFENSE (describe if applicable & check box →)

Unknown

☐ Felony
☐ Misdemeanor

- 1 ☒ Defendant—Adult
2 ☐ Defendant - Juvenile
3 ☐ Appellant
4 ☐ Probation Violator
5 ☐ Parole Violator
6 ☐ Habeas Petitioner
7 ☐ 2255 Petitioner
8 ☐ Material Witness
9 ☐ Other

DOCKET NUMBERS

Magistrate

District Court
11-CV-183

Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Am Self-Employed
	Name and address of employer: <u>T-Bone Productions, Inc. 5359 Elcan Dr. Rktn, IL</u>
	IF YES, how much do you earn per month? \$ <u>\$1,600.00 mo.</u>
	IF NO, give month and year of last employment
OTHER INCOME	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
	IF YES, how much does your Spouse earn per month? \$
	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
ASSETS	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES
	CASH: Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$
	PROPERTY: Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	IF YES, GIVE THE VALUE AND DESCRIBE IT
DEPENDENTS	MARITAL STATUS
	SINGLE
	MARRIED
	WIDOWED
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CREDIT ACCOUNTS, ETC.)
	APARTMENT OR HOME:
	Creditors
	Total Debt
OBLIGATIONS & DEBTS	Monthly Paymt
	House
	Credit card
	Electric Bill, Gas Bill, Insurance

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

5-10-11

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

I, Troy Thompson, depose and state this material was presented in the U.S. Postal Service at the Winnebago County Jail on May 10, 2011.

Troy C. Thompson

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